PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2000

Application or Docket Number

11100

Ellective October 1, 2000									/U/+1/	<u> </u>	-4		
			S FILED - PART (Column 1)		(Column 2)			SMALL ENTITY TYPE		OR	OTHER THAN OR SMALL ENTITY		
TOTAL CLAIMS			24				RA*	Έ	FEE	1	RATE	FEE	
FOR _			NUMBER FILED		NUMBER EXTRA		BASIC	FEE	355.00	OR	BASIC FEE	710.00	
TOTAL CHARGEABLE CLAIMS			28 minus 20=		. 8		X\$	9=	72	OR	X\$18=		
INDEPENDENT CLAIMS) minus 3 =		Ø		X40=		OR	X80=			
MULTIPLE DEPENDENT CLAIM P			RESENT		₽		+135=		OR	+270=			
* 11	the difference	e in column 1 is	less than z	ero, ente	r "0" in d	column 2	ТОТ		135	OR	TOTAL		
	C	LAIMS AS	MENDE	MENDED - PART II					3//	.	OTHER	THAN	
(Column 1)				(Colu				SMALL ENTITY		OR SMALL ENTITY			
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVIO PAID	BER OUSLY	PRESENT EXTRA	RAT	Έ	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	•	Minus	**		=	X\$ 9)=		OR	X\$18=	-	
	Independent	*	Minus	***	F CL AINA	-	X40	=		OR	X80=		
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							413	;≅~~	د د د د د د د د د د د د د د د د د د د	OR	+270=		
TOTAL OR TOTAL											TOTAL		
		(Column 1)		(Colu	mn 2)	(Column 3)	ADDIT.	-EE I		,	ADDIT. FEE		
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVIO PAID	IEST BER DUSLY	PRESENT EXTRA	RAT	E	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	*	Minus	**		=	X\$ 9	=		OR	X\$18=	\	
	Independent	NTATION OF M	Minus	***		=	X40	=		OR	× X80=		
	LINOI PRESE	NTATION OF MU	JUIPLE DEF	ENDENT	CLAIM		+135	=		OR	+270=		
							TO ADDIT. F	TAL EE		OR ,	TOTAL ADDIT. FEE		
	2	(Column 1)		(Colur		(Column 3)				-			
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUMI PREVIC PAID	BER	PRESENT EXTRA	RATI	=	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	•	Minus	**		=	X\$ 9	- I		OR	X\$18=		
	Independent	*	Minus	***		=	X40=	.		OR	X80=	c	
	FIRST PRESE	NTATION OF MU	JLI IPLE DEF	'ENDENT	CLAIM		+135	=		OR	+270=	5	
***	* If the entry in column 1 is less than the entry in column 2, write "0" in column 3. ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." *** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.												